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State of South Dakota

RECEIVED

Candidate's or Committee's Report of Receipts and Expenditures/UL 14 2004

S.D. SEC. OF STATE

SECRETARY OF STATE

Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070
See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Candidate or Committee SD Medical Group Management Association PAC
Complete Mailing Address 1323 S. Minnesota Ave.; Sioux Falls, SD 57105-0624
Name of Person Making Report Teresa Schumacher Daytime Phone Number (605) 336-196
If you are a candidate, what office are you seeking? N/A
If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.
N/A
Type of Report (See pages 4 & 5 of Guideline Book) Pre-Primary Report
For Reporting Period Ending (See pages 4 & 5 of Guideline Book) 05/22/04

The following verification must be completed before submitting report.
VERIFICATION OF PERSON MAKING REPORT
I
this report and to the best of my knowledge and belief it is true, correct and complete.
Date: 5-25-04 Candidate Signature or
Signature of Committee Treasurer or Chairperson
Revised July 2001 Filed this day of OU

			Appendix B
Name of Candidate or Comm	nittee SD Medical Group	Management Associat	ion PAC
For the reporting period end	ing 05/22/04		
This schedule is used for reporting a combine all contributions of \$100 or contributions on their respective line year from an individual or political paragraph, name, address and place of	Schedule A – Direct C Il direct contributions. You must keep less from individuals and the same from s below and on the next page. Any contactly and all contributions from PAC's employment (if applicable) of the contributions are space, or you	a record of all contributors, but for the ompolitical parties and enter these suntribution of more than \$100 or aggree must be entered as a separate item (in this tributor. Each type of contributor has	ms as unitemized gate during a calendar temized) giving the their own section for
Unitemized Contributions from In	dividuals:		*\$ O
Itemized Contributions from Indi	viduals	The of The Leavent	
Name	Residence Address	Place of Employment (Name of Employer)	
			\$
			\$
			\$
			\$
			\$
	1.4		\$
			\$
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			\$
			\$
			\$
			\$

Total of Itemized Contributions from Individuals:

Ø 004 Appendix B

Name of Candidate or Committee SD Medic	cal Group Management Associa	ition PAC	
For the reporting period ending 05/22/04	1		
Schedule A – Dir	ect Contributions (continued)		
Unitemized Contributions from Political Parties:	6	*\$ 0	<u> </u>
Itemized Contributions from Political Parties			
Party Name	Address	···	
		\$	1
· · · · · · · · · · · · · · · · · · ·		s	
Total of Itemized Contributions from Political Parties	•	* \$ 0	
	-		
Itemized Contributions from Political Action Committed PAC Name	tees (PAC's) - All contributions from PAC's n Address	-	
		*	
		s	
		\$	
		\$ _ 	
		 \$	
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		\$ \$	
Total of Itemized Contributions from Political Action	Committees:	*\$ <u>O</u>	Ē
Total of All Direct Contributions (Sum of all lines with	th an *)	\$ <u> </u>	

Name of Candidate or Committee: SD M	edical Group Management Ass	ociation PAC
For the reporting period ending: 05/22	/04	
Schedule B List on this schedule fund-raising events held to raise contributor gives more than \$100 or their contribution contributions must be itemized on Schedule A.	- Fund-Raising Events Proceeds e money for the candidate and the net proceeds of n results in their aggregate being more than \$10	lerived from each event. If a O in the calendar year, those
Type or Name of Event		Net Proceeds
•		
		0.0
Fotal;		0
Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
· · ·		
Cotal:		0
Scl Use this schedule to report any refunds, interest earn	nedule D - Other Income	oution.
Source of Income		Amount
Bank Account Interest		\$0.28
		*
Totals.		50.28

Appendix B

Name of Candidate or Committee:_	SD Medical	Group Management	<u>Association</u>	PAC
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For the reporting period ending: 05/22/04

 $\begin{center} \textbf{Schedule E} - \textbf{Expenditures} \end{center} \label{eq:expenditures}$

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Exp		Contributions Made to Candidates and	
Item	Amount	Name of Candidate or Committee	Amount
Advertising			
Consulting			
Postage	_		
Printing			
Rent			
Salaries			
Telephone			
Travel		The second that we will be a second to the second that the sec	
Utilities			
	T = 4 -41		
List other expense items below	List other expense amounts below		
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Appendix B

Name of Candidate or Committee: SD	Medical	Group	Management	Association	PAC
- 1					

For the reporting period ending: 05/22/04

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed to: Purpose: Amount	
	_
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otal Obligations:	

Name of Candidate or Committee:	SD	Medical	Group	Management	<u>Association</u>	PAC
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For the reporting period ending: 05/22/04

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

1. Amount on hand, if any, at the beginning of the reporting period:

\$<u>1,911.65</u>

2. Receipts

Schedule A - Direct Contributions

Schedule B - Fund-Raising Events

\$ 0

Schedule C - In Kind Contributions

\$<u>0</u>

Schedule D - Other Income

\$ 0.28

Total of all Receipts

\$_0.28

3. Total Monetary Receipts (A+B+D)

\$<u>0.28</u>

4. Candidate's Personal Contribution to Own Campaign

\$₀

5. Monetary Loans to Candidate or Committee During Reporting Period

\$o ____

6. Monetary Loans Repaid During Reporting Period

\$0

7. Expenditures - Schedule E

\$ o

8. Unpaid Obligations - Schedule F

\$ o

9. Amount on hand at the close of this reporting period. *

This should equal lines (1+3+4+5) - (6+7)

\$<u>1,911.93</u>